



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance 2018 JAN -3 PM 3:29

CLERK'S OFFICE
LEOMINSTER, MA

File with:
City or Town Clerk or Election Commission

1/3/2018

Reporting Period - Beginning: 10/21/2017 Ending: 12/31/2017

Type of report: Year-end

Mark Bodanza

Full Name of Candidate

City Councillor Ward 4

Office Sought/ District

23 Kendall Hill Road
Leominster, MA 01453

Residential Address

Committee to Elect Mark C. Bodanza

Committee Name

David Bodanza

Name of Committee Treasurer

36 School Street
Leominster, MA 01453

Committee Address

SUMMARY BALANCE INFORMATION

Ending Balance from previous report:	\$7,164.20
Total receipts this period:	\$1,250.00
Subtotal:	\$8,414.20
Total expenditures this period:	\$508.80
Ending Balance:	\$7,905.40
Total inkind contributions this period:	\$0.00
Total outstanding liabilities:	\$0.00
Name of bank(s) used:	Bank of America

Affidavit of Committee Treasurer:

I certify that I have examined this report, including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity including all contributions, loans, receipts, expenditures, disbursements, inkind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

1-3-2018

Treasurer's signature (in ink)

Date

Affidavit of Candidate (check 1 box only) :

☒ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report, and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR candidate with independent activity filing separate report.

I certify that I have examined this report and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity including contributions, loans, receipts, expenditures, disbursements, inkind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

1-3-18

Schedule A: Receipts

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

Date	Name and Residential Address	Amount	Occupation and Employer
10/26/2017	Cormier, David 9 Deer Run Road Leominster, MA 01453	\$100.00	Telecom Verizon
10/31/2017	Leblanc, Ronald J. 68 Kendall Hill Road Leominster, MA 01453	\$100.00	Retired
10/24/2017	Lisciotti, Gregg 83 Orchard Hill Park Drive Leominster, MA 01453	\$500.00	Development Self Employed
12/5/2017	Mullaney, David 17 Federal Circle Leominster, MA 01453	\$250.00	Consultant Self Employed
10/23/2017	Preville, Donald 1237 Central Street, #36 Leominster, MA 01453	\$100.00	Landscape Self Employed
10/27/2017	Tocci, Robert G. 60 Colonial Drive Leominster, MA 01453	\$100.00	Business Owner Aaron Industries
10/26/2017	Wiiks, Wendy 142 Blossom Street Leominster, MA 01453	\$100.00	Grant Writer City of Leominster
Total Itemized Receipts		\$1,250.00	
Total Unitemized Receipts		\$0.00	
Total Receipts		\$1,250.00	

Schedule B: Expenditures

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
10/26/2017	Apple Hill Farm 143 Joslin Street Leominster, MA 01453	\$450.00	Fundraiser Event Locale
10/30/2017	Bodanza & Bodanza 36 School Street Leominster, MA 01453	\$58.80	Postage
Total Itemized Expenditures		\$508.80	
Total Unitemized Expenditures		\$0.00	
Total Expenditures		\$508.80	

Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind contributions of more than \$50. In-kind contributions \$50 and under may be added together, from the committee's records, and included in line 16. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Occupation/Employer
	Total Itemized Inkind Contributions	\$0.00	
	Total Unitemized Inkind Contributions	\$0.00	
	Total Inkind Contributions	\$0.00	

Schedule D: Liabilities

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as the liabilities incurred during this reporting period.

Date	To Whom Due	Amount	Purpose
Total Outstanding Liabilities		\$0.00	



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning October 20, 2017 Ending December 31, 2017

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Michael G. Stassen

Full Name of Candidate (if applicable)

Ward 1 School Committee

Office Sought and District

893 Main St.

Residential Address

978-514-4879

Tel. No. (optional)

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 0
Line 2: Total receipts this period (page 2, line 11) \$ 0
Line 3: Subtotal (line 1 plus line 2) \$ 0
Line 4: Total expenditures this period (page 3, line 14) \$ 0
Line 5: Ending balance (line 3 minus line 4) \$ 0
Line 6: Total in-kind contributions this period (page 4) \$ 0
Line 7: Total (all) outstanding liabilities (page 4) \$ 0
Line 8: Name of bank(s) used _____

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☒ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date

2018 JAN -3 PM 3:54
CLERK'S OFFICE
CAMBRIDGE, MA

Michael G. Stassen

12/31/2017



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures.

2018 JAN -8 AM 8:34

OFFICE
CLERK, MA

Fill in dates:

Reporting Period Beginning Month 10 Date 31 Year 17 Ending Month 12 Date 31 Year 17

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

David R Cormier

Full Name of Candidate (if applicable)

Ward 3 City Council

Office Sought and District

9 Deer Run Road Leominster, MA

Residential Address

01453

978-466-9666

Tel. No. (optional)

Committee to elect David R Cormier

Committee Name

Christine M Souther

Name of Committee Treasurer

9 Deer Run Rd Leominster, MA 01453

Committee Mailing Address

978-466-9666

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ (1219.91)

Line 2: Total receipts this period (page 2, line 11) \$ 1253.00

Line 3: Subtotal (line 1 plus line 2) \$ 33.09

Line 4: Total expenditures this period (page 3, line 14) \$ 892.54

Line 5: Ending balance (line 3 minus line 4) \$ (859.45)

Line 6: Total in-kind contributions this period (page 4) \$ 200.00

Line 7: Total (all) outstanding liabilities (page 4) \$ 1584.20

Line 8: Name of bank(s) used Leominster Credit Union

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Christine M Souther

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

1/8/18

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

David R. Cormier

Candidate signature (in ink)

January 8, 2018

Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
10/25/17	Pasta Supper donations	1253	00	—
Line 9: Total receipts in excess of \$50 (or listed above)		1253	00	Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)		—	—	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1253	00	

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
10/22/17	BJ's wholesale club	115 Erdman way Leominster, MA 01453	pasta Supper supplies	66	92
11/30/17	Gazbar	1045 Central St Leominster MA 01453	presidents dinner	299	56
10/25/17	Hanna Ford	118 Lancaster St Leominster MA 01453	bread for pasta supper	60	49
10/25/17	Bolton Orchards	125 Still River Rd Bolton MA 01740	Salad items for pasta supper	139	00
10/24/17	Midtown Beef	87 Water St Fitchburg MA 01420	meatballs etc for pasta Supper	297	17
11/1/17	USPS	69 Pleasant St Gardner MA 01440	postage for Thank you notes	29	40
Line 12: Expenditures over \$50				892	54
Line 13: Expenditures \$50 and under*					
Line 14: TOTAL EXPENDITURES				892	54

Enter on page 1, line 4

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
10/25/17	Donald + Christine Souter	82 Glenwood Dr. Leominster, MA 01453	DJ for pasta supper	200.00
Enter on page 1, line 6				
Line 15: In-kind over \$50				200.00
Line 16: In-kind \$50 and under				—
Line 17: Total In-kind				200.00

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
9/10/09	David Cormier	9 Deer Run Rd Leominster, MA 01453	Campaign / loan	\$220.00
11/28/16	David Cormier	9 Deer Run Rd Leominster, MA 01453	Campaign / Loan	\$1000.00
7/24/17	David Cormier	9 Deer Run Rd Leominster MA 01453	Campaign / loan Stationary / Fund Raises	\$19.96
8/24/17	David Cormier	9 Deer Run Rd Leominster MA 01453	Campaign / loan Stationary / Donations letters	\$21.24
7/10/17	David Cormier	9 Deer Run Rd Leominster MA 01453	Campaign / loan	\$200.00
9/19/17	David Cormier	9 Deer Run Rd Leominster MA 01453	Campaign / Loan	\$125.00
Enter on page 1, line 7				
Line 18: OUTSTANDING LIABILITIES (ALL)				\$1586.20



Form CPF M 102: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

2019 JAN 10 PM 12:38

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning 11 Month 01 Date 2017 Year 12 Month 31 Date 2017 Year

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☒ 30 day after election ☒ year-end report ☐ dissolution

Brandon L. Robbins

Full Name of Candidate (if applicable)

Councilor @ Large

Office Sought and District

225 Legate Hill Rd. Leominster

Residential Address

Tel. No. (optional)

The Committee to Elect Brandon Robbins

Committee Name

Susan K. Robbins

Name of Committee Treasurer

225 Legate Hill Rd. Leominster, Ma.

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 266.04

Line 2: Total receipts this period (page 2, line 11) \$ 720.

Line 3: Subtotal (line 1 plus line 2) \$ 986.04

Line 4: Total expenditures this period (page 3, line 14) \$ 1000.00

Line 5: Ending balance (line 3 minus line 4) \$ -13.96

Line 6: Total in-kind contributions this period (page 4) \$ 0-

Line 7: Total (all) outstanding liabilities (page 4) \$ 398.31

Line 8: Name of bank(s) used Worker's Credit Union

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Susan K. Robbins

1/4/17

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☒ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Brandon L. Robbins

1/4/17

Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
11/06/2017	Justin Harrington 27 Worcester Rd. STERLING, Ma	220 00	Gm TREE Services 27 Worcester Rd. Sterling, Ma
11/27	Ed Zephir, JR 437 West St. Leominster, Ma	500 00	owner United Solutions
Line 9: Total receipts in excess of \$50 (or listed above)		720 00	Enter on page 1, line 2
Line 10: Total receipts \$50 and under* (not listed above)		0 00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		720 00	

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
11/14/2017	Creative Print Products	243 Whitney ST Leominster, Ma.	Campaign Signs.	480	00
12/28/2017	Creative Print Products	"	"	520	00
			Line 12: Expenditures over \$50	1,000	00
			Line 13: Expenditures \$50 and under*	0	00
			Line 14: TOTAL EXPENDITURES	1,000	00

Enter on page 1, line 4.

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				

Enter on page 1, line 6

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
9/27/17	Creative Print Products	243 Whitney St Leominster, MA	Signage + T-shirts	398 ³¹
Line 18: OUTSTANDING LIABILITIES (ALL)				

Enter on page 1, line 7



Form CPF M 102: Campaign Finance Report
Municipal Form
Office of Campaign and Political Finance

2018 JAN 12 AM 10:06

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning Month 10 Date 21 Year 2017 Ending Month 12 Date 31 Year 2017

Type of report: (Check one)
☐ 8th day preceding preliminary ☐ 8th day preceding election ☒ 30 day after election ☒ Year-end report ☐ dissolution

Wendy Anderson
Full Name of Candidate (if applicable)
School Committee At Large
Office Sought and District
104 Harrison St
Residential Address
732-692-4566
Tel. No. (optional)

Committee to Elect Wendy Anderson
Committee Name
Jason Anderson
Name of Committee Treasurer
104 Harrison St
Committee Mailing Address
732-692-4566
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 39.47
Line 2: Total receipts this period (page 2, line 11) \$ —
Line 3: Subtotal (line 1 plus line 2) \$ 39.47
Line 4: Total expenditures this period (page 3, line 14) \$ —
Line 5: Ending balance (line 3 minus line 4) \$ 39.47
Line 6: Total in-kind contributions this period (page 4) \$ —
Line 7: Total (all) outstanding liabilities (page 4) \$ —
Line 8: Name of bank(s) used Leominster Credit Union

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Jason Anderson
Treasurer's signature (in ink)

1/2/18
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Wendy Anderson
Candidate signature (in ink)

1/2/18
Date



Commonwealth
of Massachusetts

Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

GARY ZIMMERMAN

2018 JAN 11 PM 2:01

City or Town of: LEOMINSTER

CLERK'S OFFICE
LEOMINSTER, MA

Fill in Reporting Period dates: Beginning Date: OCT 26 2017 Ending Date: Dec 31, 2017

Type of Report: (Check one)

☐ 8th day preceding
preliminary/primary

☐ 8th day preceding election

☐ 30th day following election
(Town or Special)

☒ 20th day of January
(Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/11/18		47 LYNNHAVEN RD	City Council



2019 JAN 16 AM 9:45

City or Town of: Leominster

Reporting Period: Beginning: 10-21-17

Ending: 12/31/2017

(MM/DD/YYYY)

(MM/DD/YYYY)

Type of Report: (Check One)

☐ 8th day preceding preliminary/primary☐ 8th day preceding election☐ 30th day following election (town or special)☒ 20th day of January (Year-End report)

Pursuant to M.G.L. Chapter 55:

1. I certify that I am a candidate for or currently hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

[illegible]



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 JAN 16 AM 10:17

File with:
City or Town Clerk or Election Commission

CLERK'S OFFICE
LEMINSTER, MA

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning 10-21-2017 Ending 12-31-2017

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ Year-end report ☐ dissolution

Nona L. Ojala

Full Name of Candidate (if applicable)

Board 4 School Committee

Office Sought and District

320 Pleasant St.

Residential Address 978

Leominster, MA 01453 537-2904

Tel. No. (optional)

Committee to Elect Nona Ojala

Committee Name

Laurie E. Ojala

Name of Committee Treasurer

40 320 Pleasant St

Committee Mailing Address 978

Leominster, MA 01453 537-2904

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 615.06
Line 2: Total receipts this period (page 2, line 11) \$ —
Line 3: Subtotal (line 1 plus line 2) \$ 615.06
Line 4: Total expenditures this period (page 3, line 14) \$ 40.77
Line 5: Ending balance (line 3 minus line 4) \$ 574.29
Line 6: Total in-kind contributions this period (page 4) \$ n/a
Line 7: Total (all) outstanding liabilities (page 4) \$ n/a
Line 8: Name of bank(s) used Leominster Employees Federal Credit Union

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☒ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

[illegible]

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

[illegible]

Enter on page 1, line 4.

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-kind over \$50				
Line 16: In-kind \$50 and under				
Line 17: Total In-kind				n/a

Enter on page 1, line 6

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Line 18: OUTSTANDING LIABILITIES (ALL)				n/a

Enter on page 1, line 7

Josh W. Bowdridge



Commonwealth
of Massachusetts

Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 JAN 18 AM 8:33

City or Town of: Leominster

LEOMINSTER OFFICE
LEOMINSTER, MA

Fill in Reporting Period dates: Beginning Date: 10/21/17 Ending Date: 1/18/18

Type of Report: (Check one)

- ☐ 8th day preceding preliminary/primary
☐ 8th day preceding election
☐ 30th day following election (Town or Special)
☒ 20th day of January (Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/18/18		10 Tisdale Ave	School comm. WARD 4



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

2018 JAN 18 PM 12:05

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning Month 01 Date 01 Year 2017 Ending Month 12 Date 31 Year 2017

Type of report: (Check one)
☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☐ year-end report ☒ dissolution

Charles Milhans
Full Name of Candidate (if applicable)
City Councilor at Large
Office Sought and District
54 Rose Ave, Leominster, MA 01453
Residential Address
978 8406478
Tel. No. (optional)

CTE Charles Milhans
Committee Name
John Tata
Name of Committee Treasurer
54 Rose Ave
Committee Mailing Address
Leominster, MA 01453 978 8406478
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 391.00
Line 2: Total receipts this period (page 2, line 11) \$ 0
Line 3: Subtotal (line 1 plus line 2) \$ 391.00
Line 4: Total expenditures this period (page 3, line 14) \$ 250.00
Line 5: Ending balance (line 3 minus line 4) \$ 141.00
Line 6: Total in-kind contributions this period (page 4) \$ 0
Line 7: Total (all) outstanding liabilities (page 4) \$ 0
Line 8: Name of bank(s) used Rollstone

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
8/2/2017	Facebook	Hecker way Menlo Park, CA	Paid due advertising with Face book	250	00
12/2/2017	Pilgrim Church Food Bank	West Street Leominster, MA	Donated money to Food Bank	171	00
Line 12: Expenditures over \$50				391	00
Line 13: Expenditures \$50 and under*				0	00
Line 14: TOTAL EXPENDITURES				391	00

Enter on page 1, line 4.

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 JAN 19 PM 12:08

OFFICE

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 1/1/2017 Ending Date: 12/31/2017

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☒ dissolution

Andrea Freeman Candidate Full Name (if applicable)	Committee to Elect Andrea Freeman Committee Name
Leominster School Committee, At-Large Office Sought and District	Miriam Scagnetti Name of Committee Treasurer
431 Pleasant Street, Leominster, MA 01453 Residential Address	54 Green Street, A405, Leominster, MA 01453 Committee Mailing Address
Telephone Number (optional): 9785370403	Telephone Number (optional): 9785344965

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	-853.47
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	-853.47
Line 4: Total expenditures this period (page 5, line 14)	0
Line 5: Ending Balance (line 3 minus line 4)	-853.47
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	853.47
Line 8: Name of bank(s) used:	Rollstone Bank & Trust, Leominster, MA

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Miriam Scagnetti (Treasurer's signature) Date: 1/18/2018

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature) Date: 1/17/2018

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
10/20/2015	Andrea Freeman	431 Pleasant Street, Leominster, MA 01453	campaign loan	76.24
10/20/2015	Andrea Freeman	431 Pleasant Street, Leominster, MA 01453	campaign loan	478.13
10/24/2015	Andrea Freeman	431 Pleasant Street, Leominster, MA 01453	campaign loan	19.10
10/26/2015	Andrea Freeman	431 Pleasant Street, Leominster, MA 01453	campaign loan	140.00
10/29/2015	Andrea Freeman	431 Pleasant Street, Leominster, MA 01453	campaign loan	140.00

FROM THE DESK OF

ANDREA FREEMAN

1/17/2018

To Whom it May Concern:

Please accept this written notice that I forgive the debt of the Campaign to Elect Andrea Freeman in the amount of \$853.47.

Sincerely, Andrea Freeman
431 Pleasant St.
Leominster, MA 01453
978-537-0403

Enter on page 1, line 7 →

Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)

853.47



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 JAN 19 PM 12: 48

File with:
City or Town Clerk or Election Commission

CLERK'S OFFICE
WINCHESTER, MA

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning 10 21 2017 Ending 12 31 2017

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ Year-end report ☐ dissolution

Isabelle Aiera

Full Name of Candidate (if applicable)

Ward 3 School Committee

Office Sought and District

3 Powder House Ln

Residential Address

(978)-833-3358

Tel. No. (optional)

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$-175.97

Line 2: Total receipts this period (page 2, line 11) \$ 0.00

Line 3: Subtotal (line 1 plus line 2) \$-175.97

Line 4: Total expenditures this period (page 3, line 14) \$ 0.00

Line 5: Ending balance (line 3 minus line 4) \$-175.97

Line 6: Total in-kind contributions this period (page 4) \$ 0.00

Line 7: Total (all) outstanding liabilities (page 4) \$ 0.00

Line 8: Name of bank(s) used _____

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date



Commonwealth
of Massachusetts

Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 JAN 22 AM 10:29

City or Town of: Leominster

CLERK'S OFFICE
LEOMINSTER, MA

Fill in Reporting Period dates: Beginning Date: _____ Ending Date: 12/31/17

Type of Report: (Check one)

- ☐ 8th day preceding preliminary/primary ☐ 8th day preceding election ☐ 30th day following election (Town or Special) ☒ 20th day of January (Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/22/18	Elaine Luff	135 Highland Ave	Ward 5 School Committee



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

2019 JAN 22 AM 10: 53

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning Month 10 Day 21 Year 17 Ending Month 12 Day 31 Year 17

Type of report: (Check one)
☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ Year-end report ☐ dissolution

Full Name of Candidate (if applicable)
Charlotte Waitkus
Word as Committee
Office Sought and District
245 Water Street 3
Residential Address
Leominster, MA 01453
9781846-9653 Tel. No. (optional)

Committee Name
Name of Committee Treasurer
Committee Mailing Address
Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 279.00
Line 2: Total receipts this period (page 2, line 11) \$ 0
Line 3: Subtotal (line 1 plus line 2) \$ -279.00
Line 4: Total expenditures this period (page 3, line 14) \$ 0
Line 5: Ending balance (line 3 minus line 4) \$ -279.00
Line 6: Total in-kind contributions this period (page 4) \$ 0
Line 7: Total (all) outstanding liabilities (page 4) \$ 0
Line 8: Name of bank(s) used Leominster Credit Union
IC Federal

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 JAN 22 PM 1:46

File with:
City or Town Clerk or Election Commission

CLERK'S OFFICE
ROCKFORD, MA

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning

Month

Date

Year

Ending

Month

Date

Year

Type of report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☐ 30 day after election

☒ Year-end report

☒ Dissolution

Full Name of Candidate (if applicable)

Joshua Klaus
Ward 3 School Comm

Office Sought and District

218 Central St.

Residential Address

Tel. No. (optional)

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report

\$

Line 2: Total receipts this period (page 2, line 11)

\$

Line 3: Subtotal (line 1 plus line 2)

\$

Line 4: Total expenditures this period (page 3, line 14)

\$

Line 5: Ending balance (line 3 minus line 4)

\$

Line 6: Total in-kind contributions this period (page 4)

\$

Line 7: Total (all) outstanding liabilities (page 4)

\$

Line 8: Name of bank(s) used

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☒ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 JUN 22 PM 2:27

CLERK'S OFFICE

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 01/01/2017 Ending Date: 11/06/2017

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☐ year-end report ☒ dissolution

Deborah Toivonen
Candidate Full Name (if applicable)
Council, Worcester, Leominster, City of
Office Sought and District
14 Macintosh Lane, Leominster, MA 01453
Residential Address
E-mail:
Phone # (optional):

Committee to Elect Deborah Toivonen
Committee Name
Donna Fiduccia
Name of Committee Treasurer
75 Constitution Dr., Leominster, MA 01453
Committee Mailing Address
E-mail:
Phone # (optional):

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	121.94
Line 2: Total receipts this period (page 3, line 11)	0
Line 3: Subtotal (line 1 plus line 2)	121.94
Line 4: Total expenditures this period (page 5, line 14)	121.94
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	13
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Rollstone Bank & Trust

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Donna Fiduccia (Treasurer's signature)

Date: 1/20/2018

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Candidate's signature)

Date: _____

SCHEDULE B: EXPENDITURES (continued)[illegible]

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 6 on page 1.

[illegible]

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 JAN 22 PM 2:27

CLERK'S OFFICE
SEPT. MA

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: 10/21/2017 Ending Date: 12/31/2017

Type of Report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Thomas F. Ardinger Candidate Full Name (if applicable)	Committee to Elect Thomas F. Ardinger Committee Name
City Council Office Sought and District	Donna Fiduccia Name of Committee Treasurer
12 Narcissus Rd., Leominster, MA 01453 Residential Address	75 Constitution Dr., Leominster, MA 01453 Committee Mailing Address
E-mail: _____	E-mail: <u>dfiduccia@verizon.net</u>
Phone # (optional): _____	Phone # (optional): _____

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	538.80
Line 2: Total receipts this period (page 3, line 11)	1,615.00
Line 3: Subtotal (line 1 plus line 2)	2,153.80
Line 4: Total expenditures this period (page 5, line 14)	1,776.51
Line 5: Ending Balance (line 3 minus line 4)	377.29
Line 6: Total in-kind contributions this period (page 6)	78.37
Line 7: Total (all) outstanding liabilities (page 7)	13,618.29
Line 8: Name of bank(s) used:	Rollstone Bank & Trust

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Donna Fiduccia (Treasurer's signature) Date: 1/22/2018

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee and no activity independent of the committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: _____ (Candidate's signature)

Date: _____

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
11/1/2017	Thomas F. Ardinger 12 Narcissus rd. Leominster, MA 01453	62.00	Loan
10/26/2017	Henry C. Kulik, Jr. 46 Oakmont Ave. Westminster, MA 01473	100.00	Self-Employed
10/26/2017	Gregg Lisciotti 83 Orchard Hill Park Dr. Leominster, MA 01453	500.00	Self-Employed Real Estate Developer
10/31/2017	Dean Tran - CTE 44 Tibbett Circle Fitchburg, MA 01420	100.00	Massachusetts State Senator Worcester-Middlesex District
Line 9: Total Receipts over \$50 (or listed above)		762.00	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)		853.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,615.00	

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total Receipts over \$50 (or listed above)		0	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)		0	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1,615.00	

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
11/1/2017	FACEBOOK		ADVERTISING	111.91
11/1/2017	HOLDEN LANDMARK CORP.	1105A MAIN ST. HOLDEN, MA 01520	ADVERTISING	665.00
11/3/2017	LOWELL SUN	491 DUTTON ST. LOWELL, MA 01854	ADVERTISING	999.60
Line 12: Total Expenditures over \$50 (or listed above)				1,776.51
Line 13: Total Expenditures \$50 and under* (not listed above)				0
<div style="display: flex; justify-content: space-between;"> Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD </div>				1,776.51

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE B: EXPENDITURES (continued)[illegible]

Line 12: Expenditures over \$50 (or listed above)

01

Line 13: Expenditures \$50 and under* (not listed above)

01

Enter on page 1, line 4 →

Line 14: TOTAL EXPENDITURES IN THE PERIOD

1,776.51

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15: In-Kind Contributions over \$50 (or listed above)		0
		Line 16: In-Kind Contributions \$50 & under (not listed above)		78.37
Enter on page 1, line 6 →		Line 17: TOTAL IN-KIND CONTRIBUTIONS		78.37

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
12/31/2015	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	Ink, Paper supplies, Etc.	\$268.02
12/31/2016	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	Nor-East Designs Signs, Bumpers, etc.	\$4,830.75
12/31/2016	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	U.S. Post Office Stamps 17rolls of 100	\$996.63
6/17/2016	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	July 4th Parade Fee 2016	\$75.00
12/31/2016	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	Staples Printing Supplies	\$2,910.68
12/31/2016	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	Advertising WPKZ	\$350.00
10/01/2016	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	Misc. Small Items	\$213.16
10/06/2016	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	Loan From Candidate	\$2,412.00
6/21/2017	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	Nor-East Designs	\$276.00
7/22/2017	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	Nation Builder App	\$29.00
9/04/2017	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	Walgreens - T-Shirts	\$100.00
9/12/2017	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	Staples - Outdoor Banners, labels, tri-folds, etc.	\$781.05
09/13/2017	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	P.O. Leominster - Postcards Qty3 @ \$34.00ea	\$102.00
10/26/2017	Thomas F. Ardinger	12 Narcissus rd. Leominster, MA 01453	Advertising WPKZ	\$274.00
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				\$13,618.29



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 JAN 24 PM 12: 25

File with:
City or Town Clerk or Election Commission

CITY CLERK'S OFFICE
LEOMINSTER, MA

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning Month 10 Date 31 Year 2017 Ending Month 12 Date 31 Year 2017

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Cody Daniel Caisse

Full Name of Candidate (if applicable)

School Committee AT Large

Office Sought and District

350 Union Street

Residential Address

Leominster, Ma 01453

Tel. No. (optional)

Committee to elect Cody Caisse

Committee Name

Patricia K. Caisse

Name of Committee Treasurer

35 Barry Lane

Committee Mailing Address

Leominster, Ma 01453

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 188.93
Line 2: Total receipts this period (page 2, line 11) \$ 0
Line 3: Subtotal (line 1 plus line 2) \$ 188.93
Line 4: Total expenditures this period (page 3, line 14) \$ 0
Line 5: Ending balance (line 3 minus line 4) \$ 188.93
Line 6: Total in-kind contributions this period (page 4) \$ 0
Line 7: Total (all) outstanding liabilities (page 4) \$ 0
Line 8: Name of bank(s) used TD Bank N.A

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Patricia K. Caisse

Treasurer's signature (in ink)

1-21-2018

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Cody Caisse

Candidate signature (in ink)

01-21-2018

Date



Commonwealth
of Massachusetts

Form CPF M 102-0: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 JAN 25 PM 4:16

City or Town of: Leominster

CITY CLERK'S OFFICE
LEOMINSTER, MA

Fill in Reporting Period dates:

Beginning Date:

10/21/17

Ending Date:

12/31/17

Type of Report: (Check one)

☐ 8th day preceding
preliminary/primary

☐ 8th day preceding election

☐ 30th day following election
(Town or Special)

☒ 20th day of January
(Year-End Report)

Pursuant to M.G.L., Chapter 55:

1. I certify that I am a candidate for or hold Municipal Office.
2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.
3. I certify that I do not have a political committee.

DATE	I. SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1-25-18	<i>Robert J. Antune</i>	224 Merriam Ave Leominster MA	Ward 5 City Council



Form CPF M 102: Campaign Finance Report
Municipal Form

Office of Campaign and Political Finance

2018 JAN 29 AM 9:31

CITY CLERK'S OFFICE
LEOMINSTER, MA

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:
Reporting Period Beginning 11-27-17 Ending 12-31-17

Type of report: (Check one)
☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

Pauline Cormier
Full Name of Candidate (if applicable)
City Council Ward 2
Office Sought and District
107 Third St.
Residential Address
Leominster MA 01453
Tel. No. (optional) 978-537-5021

Committee to Elect Pauline Cormier
Committee Name
Elizabeth Foley
Name of Committee Treasurer
222 Granite St.
Committee Mailing Address
Leominster MA 01453
Tel. No. (optional) 978-537-1956

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report \$ 440. -
Line 2: Total receipts this period (page 2, line 11) \$ _____
Line 3: Subtotal (line 1 plus line 2) \$ _____
Line 4: Total expenditures this period (page 3, line 14) \$ _____
Line 5: Ending balance (line 3 minus line 4) \$ _____
Line 6: Total in-kind contributions this period (page 4) \$ _____
Line 7: Total (all) outstanding liabilities (page 4) \$ _____
Line 8: Name of bank(s) used Enterprise Bank

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Elizabeth A. Foley
Treasurer's signature (in ink)

1/27/18
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Pauline M. Cormier
Candidate signature (in ink)

1/27/18
Date



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 FEB 16 AM 9:42

File with:
City or Town Clerk or Election Commission

CITY CLERK'S OFFICE
LEOMINSTER, MA

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning Month 12 Date 6 Year 2017 Ending Month 12 Date 31 Year 2017

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

John M. Dombrowski

Full Name of Candidate (if applicable)

Councilor At Large

Office Sought and District

41 Washington St., Leominster

Residential Address

978-833-8733

Tel. No. (optional)

NA

Committee Name

NA

Name of Committee Treasurer

NA

Committee Mailing Address

NA

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report

\$ 0

Line 2: Total receipts this period (page 2, line 11)

\$ 0

Line 3: Subtotal (line 1 plus line 2)

\$ 0

Line 4: Total expenditures this period (page 3, line 14)

\$ 0

Line 5: Ending balance (line 3 minus line 4)

\$ 0

Line 6: Total in-kind contributions this period (page 4)

\$ 0

Line 7: Total (all) outstanding liabilities (page 4)

\$ 0

Line 8: Name of bank(s) used

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

NA

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☒ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

[Signature]
Candidate signature (in ink)

1-4-18
Date



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2018 FEB 16 AM 10:43

CITY CLERK'S OFFICE
LEOMINSTER, MA

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

Fill in dates:

Reporting Period Beginning

Month

Date

Year

Ending

Month

Date

Year

Type of report: (Check one)

☐ 8th day preceding preliminary

☐ 8th day preceding election

☐ 30 day after election

☐ year-end report

☒ dissolution

Committee to elect Nathan Fontaine

Full Name of Candidate (if applicable)

Office Sought and District

None

Residential Address

449 Mechanic St Leominster

Tel. No. (optional)

Committee to elect Nathan Fontaine

Committee Name

Jeremy Mearns

Name of Committee Treasurer

Nathan P. Fontaine, Committee

Committee Mailing Address

978-227-6357

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report

\$ 25.00

Line 2: Total receipts this period (page 2, line 11)

\$ 0

Line 3: Subtotal (line 1 plus line 2)

\$ 0

Line 4: Total expenditures this period (page 3, line 14)

\$ 25

Line 5: Ending balance (line 3 minus line 4)

\$ 0

Line 6: Total in-kind contributions this period (page 4)

\$ 0

Line 7: Total (all) outstanding liabilities (page 4)

\$ 0

Line 8: Name of bank(s) used Leominster Petition

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

[illegible]

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.